



I / We wish to join:

Limestone League	\$5,000 +
Tea Room Circle	\$1,000 - \$4,999
Icon Society	\$500 - \$999
School 5 Club	\$250 - \$499
Other	\$ _____

Name will be printed in the Annual Report for gifts of \$50 or more.

\_\_\_\_\_  
Name(s) as you wish to be recognized in publications.

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

Enclosed is my/our contribution \$ \_\_\_\_\_

Enclosed is my/our pledge to be paid:

\_\_\_\_\_ Quarterly    \_\_\_\_\_ Semi-annually    \_\_\_\_\_ Annually

Beginning \_\_\_\_\_ (pledge reminders will be sent)

Method of Payment: \_\_\_\_\_ Check    \_\_\_\_\_ Credit Card

Checks payable to: Indiana State Museum Foundation

Credit Card # (MC/Visa) \_\_\_\_\_

Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

\_\_\_\_\_ I/We intend to make a planned/deferred gift to the Indiana State Museum Foundation.

\_\_\_\_\_ Please send information about giving through wills and trusts.

Please mail completed form to:

Indiana State Museum Foundation  
650 W. Washington St.  
Indianapolis In, 46204